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SERIAL NUMBER 10/613,975	FILING OR 371(c) DATE 07/03/2003 RULE	CLASS 424	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. CSI 130
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APPLICANTS

Donald L. Wise, Belmont, MA;
 Debra J. Trantolo, Princeton, MA;
 David D. Hile, Medford, MA;
 Stephen A. Doherty, Newmarket, NH;

**** CONTINUING DATA *******

This appln claims benefit of 60/393,777 07/03/2002

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ****

** 10/15/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 1	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <u>Ken</u> Examiner's Signature Initials				

ADDRESS

23579

TITLE

Vaccines to induce mucosal immunity

FILING FEE RECEIVED 449	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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